



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3953

| | | | | |
|--------------------------------------|---|---------------------|---------------------------------|---|
| SERIAL NUMBER 09/755,339 ✓ | FILING OR 371(c) DATE 01/03/2001 ✓ RULE | CLASS 370 | GROUP ART UNIT 2616 ✓ | ATTORNEY DOCKET NO. 034704-000090 |
|--------------------------------------|---|---------------------|---------------------------------|---|

APPLICANTS

Selim Shlomo Rakib, Cupertino, CA;
 Yehuda Azenkot, Cupertino, CA;

** CONTINUING DATA *Yes TP* *****

This application is a DIV of 08/895,612 07/16/1997 PAT 6,307,868 which is a CIP of 08/684,243
 07/19/1996 PAT 6,356,555
 which is a CIP of 08/588,650 01/19/1996 PAT 5,793,759
 which is a CIP of 08/519,630 08/25/1995 PAT 5,768,269

** FOREIGN APPLICATIONS *N/A TP* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/13/2001

| | | | | | |
|--|---|--------------------------|------------------------|-------------------------------------|---|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>TRI H. PHAN</i> Examiner's Signature | STATE OR COUNTRY CA ✓ | SHEETS DRAWING 59 ✓ | TOTAL CLAIMS 38 35 | INDEPENDENT CLAIMS 8 8 |
|--|---|--------------------------|------------------------|-------------------------------------|---|

ADDRESS

#26717 ✓
 ROBERT E KREBS
 THELEN, REID & PRIEST LLP
 P.O. BOX 640640
 SAN JOSE, CA95164-0640

TITLE

Apparatus and method for receiving upstream data transmissions from multiple remote transmitters ✓

| | | |
|------------------------------------|---|---|
| FILING FEE RECEIVED 1514 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|---|---|